

# **HEALTH QUARTERLY STATEMENT**

AS OF MARCH 31, 2004
OF THE CONDITION AND AFFAIRS OF THE

John Deere Health Plan, Inc.

(Current Period) (Prior Period)  Organized under the Laws of Illinois , State of Domicile or Port of Entry  Illinois  Country of Domicile United States of America	
Country of Domicile United States of America	
Licensed as hydrogen types. Life Assident 9 Health [ ] Preparty/Consists [ ] Dental Consists Comparation [ ]	
Licensed as business type: Life, Accident & Health [ ] Property/Casualty [ ] Dental Service Corporation [ ] Vision Service Corporation [ ] Other [ ] Health Maintenance Organization [ X ]	
Hospital, Medical & Dental Service or Indemnity [ ] Is HMO, Federally Qualified? Yes [ ] No [ X ]	
Date Incorporated 08/05/1985 Commenced Business 07/01/1985	
Statutory Home Office 1300 River Drive , Moline, IL 61265	
(Street and Number) (City or Town, State and Zip Code)	
Main Administrative Office1300 River DriveMoline, IL 61265309-765-12	
(Street and Number) (City or Town, State and Zip Code) (Area Code) (Telephor	ne Number)
Mail Address 1300 River Drive , Moline, IL 61265 (Street and Number or P.O. Box) (City or Town, State and Zip Code)	
Primary Location of Books and Records 1300 River Drive Moline, IL 61265 309-765-12	221
(Street and Number) (City or Town, State and Zip Code) (Area Code) (Telephor	ne Number)
Internet Website Address JohnDeereHealth.com	
Statutory Statement Contact Joan G. Mincer 309-765-1221 (Name) (Area Code) (Telephone Number) (Extension)	
MincerJoanG@JohnDeere.com 309-748-1146	
(E-mail Address) (FAX Number)	
Policyowner Relations Contact 1300 River Drive Moline, IL 61265 309-765-1200 (Street and Number) (City or Town, State and Zip Code) (Area Code) (Telephone Number	(Extension)
OFFICERS	) (Extension)
Name Title Name Title	
Richard Lowell Bartsh M.D. , President James Alan Cousins , Treasurer	
Victoria Jane Graves , Secretary ,	
OTHER OFFICERS	
Charles Phillip Parsons , Senior Vice President David Wayne Anderson , Senior Vice Preside	ant .
Bruce Chase Steffens M.D. Senior Vice President Douglas Robert Niska Vice President Vice President	<i>/</i> ///
DIRECTORS OR TRUSTEES	
James Alan Cousins Charles Phillip Parsons Richard Lowell Bartsh M.D. James Edward Heck	ær
William Kenneth Appelgate John Willard Golden M.D. Cathie Sue Whiteside Bruce Chase Steffens	M.D.
Victoria Kauzlarich Deno James Minas Charlotte Hershberger Koenig M.D.	
State ofIllinois	
County ofRock IslandSS	
The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting p	eriod stated
above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein state this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and li	
of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and	
completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may	differ; or, (2)
that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledgerespectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when require	
exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of control of the enclosed statement.	or in addition
to the enclosed statement.	
Richard Lowell Bartsh M.D. James Alan Cousins Victoria Jane Graves	
President Treasurer Secretary	
· · · · · · · · · · · · · · · · · · ·	1 No [ ]
· · · · · · · · · · · · · · · · · · ·	] No [ ]
a. Is this an original filing?  Subscribed and sworn to before me this  day of May, 2004  a. Is this an original filing?  Yes [ X b. If no,  1. State the amendment number	] No [ ]
a. Is this an original filing?  Yes [ X Subscribed and sworn to before me this b. If no,	] No [ ]
a. Is this an original filing?  Subscribed and sworn to before me this  day of May, 2004  a. Is this an original filing?  Yes [ X b. If no,  1. State the amendment number	] No [ ]

# **ASSETS**

			Current Statement Date	<u> </u>	4
		1	2	3	4
				Net Admitted Assets	December 31 Prior Year Net
		Assets	Nonadmitted Assets	(Cols. 1 - 2)	Admitted Assets
1.	Bonds	160,711,049			
	Stocks:	, ,			, ,
	2.1 Preferred stocks			0	0
	2.2 Common stocks				3,235,236
	Mortgage loans on real estate:		•		
				0	0
	3.1 First liens				
	3.2 Other than first liens			0	0
4.	Real estate:				
	4.1 Properties occupied by the company (less				
	\$ encumbrances)			0	0
	4.2 Properties held for the production of income				
	(less \$ encumbrances)			0	0
	4.3 Properties held for sale (less				
					0
	\$ encumbrances)			JU	U
5.	Cash (\$				
	cash equivalents (\$0 )				
	and short-term investments (\$11, 122,747 )	11,122,747		11 , 122 , 747	17 , 210 , 212
					0
	Other invested assets				0
	Receivable for securities				
	Aggregate write-ins for invested assets			0	
	Subtotals, cash and invested assets (Lines 1 to 9)				
	Investment income due and accrued	1,709,248		1,709,248	1,842,988
	Premiums and considerations:				
	12.1 Uncollected premiums and agents' balances in the course of				
	collection	18 , 147 , 870	1,280,634	16,867,236	7,228,473
	12.2 Deferred premiums, agents' balances and installments booked but				
	deferred and not yet due (including \$earned				
	but unbilled premiums)			0	0
	12.3 Accrued retrospective premiums.				0
	Reinsurance:				
	13.1 Amounts recoverable from reinsurers	13 313		13 313	203 026
	13.2 Funds held by or deposited with reinsured companies				
					0
	13.3 Other amounts receivable under reinsurance contracts				U
	Amounts receivable relating to uninsured plans				_
	Current federal and foreign income tax recoverable and interest thereon				0
	Net deferred tax asset				0
16.	Guaranty funds receivable or on deposit			0	0
17.	Electronic data processing equipment and software			0	0
18.	Furniture and equipment, including health care delivery assets				
	(\$)			0	0
	Net adjustment in assets and liabilities due to foreign exchange rates				0
	Receivables from parent, subsidiaries and affiliates				n
	Health care (\$2,229,869 ) and other amounts receivable				112,324
				0	112,324
	Other assets nonadmitted			T	
	Aggregate write-ins for other than invested assets	159,353	13,284	146,069	Ω
	Total assets excluding Separate Accounts, Segregated Accounts and				
	Protected Cell Accounts (Lines 10 to 23)	203,611,313	10,987,629	192,623,684	195,329,382
25.	From Separate Accounts, Segregated Accounts and Protected				
	Cell Accounts.			0	0
26.	Total (Lines 24 and 25)	203,611,313	10,987,629	192,623,684	195,329,382
	DETAILS OF WRITE-INS				
			^	^	^
	Summary of remaining write-ins for Line 9 from overflow page			0	D
	Totals (Lines 0901 thru 0903 plus 0998)(Line 9 above)	0	0	0	0
	Other Accounts Receivable.			146,069	0
2302.	State Income Tax	13,284	13,284	0	0
2398.	Summary of remaining write-ins for Line 23 from overflow page	0	0	0	0
	Totals (Lines 2301 thru 2303 plus 2398)(Line 23 above)	159,353			0

**LIABILITIES, CAPITAL AND SURPLUS** 

	LIABILITIES, CAP	, \_ / \.	Current Period		Prior Year	
		1 Covered	2 Uncovered	3 Total	4 Total	
1.	Claims unpaid (less \$	100 , 780 , 964	9,929,920	110,710,884	93,315,097	
2.	Accrued medical incentive pool and bonus amounts	937 , 219		937 , 219	255,210	
3.	Unpaid claims adjustment expenses			0	0	
4.	Aggregate health policy reserves			0	0	
5.	Aggregate life policy reserves			0	0	
6.	Property/casualty unearned premium reserve			0	0	
7.	Aggregate health claim reserves			0	0	
8.	Premiums received in advance	5 , 886 , 500		5 , 886 , 500	22 , 158 , 214	
9.	General expenses due or accrued	4,282,614		4,282,614	4 , 046 , 485	
10.1	Current federal and foreign income tax payable and interest thereon (including					
	\$	675,422		675,422	0	
10.2	Net deferred tax liability			0	0	
11.	Ceded reinsurance premiums payable			0	0	
12.	Amounts withheld or retained for the account of others			0	0	
13.	Remittances and items not allocated			0	0	
14.	Borrowed money (including \$ current) and					
	interest thereon \$ (including					
	\$ current)			0	0	
15.	Amounts due to parent, subsidiaries and affiliates			0	1,791,161	
16.	Payable for securities				0	
17.	Funds held under reinsurance treaties with (\$					
	authorized reinsurers and \$unauthorized					
	reinsurers)			0	0	
18.	Reinsurance in unauthorized companies				0	
19.	Net adjustments in assets and liabilities due to foreign exchange rates				0	
20.	Liability for amounts held under uninsured accident and health plans				0	
21.	Aggregate write-ins for other liabilities (including \$					
	current)	4,701,682	0	4,701,682	233,301	
22.	Total liabilities (Lines 1 to 21)					
	Common capital stock					
24.	Preferred capital stock					
25.	Gross paid in and contributed surplus					
26.	Surplus notes					
27.	Aggregate write-ins for other than special surplus funds	xxx	XXX	1,500,000	1,500,000	
28.	Unassigned funds (surplus)					
29.	Less treasury stock, at cost:					
	29.1shares common (value included in Line 23)					
	\$	xxx	xxx		0	
	29.2shares preferred (value included in Line 24)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	700			
	\$	XXX	XXX		0	
30.	Total capital and surplus (Lines 23 to 28 minus Line 29)					
31.	Total liabilities, capital and surplus (Lines 23 to 28 minus Line 29)	XXX	XXX	192,623,684	195,329,381	
01.		XXX	XXX	102,020,004	100,020,001	
2101	Payables From Cost Contracts	62 801		62 801	27 260	
2101.	Payable to CMS				0	
2102. 2103.	State Income Taxes Payable.			,		
	,					
2198.	Summary of remaining write-ins for Line 21 from overflow page					
2199.	Totals (Lines 2101 thru 2103 plus 2198) (Line 21 above)	4,701,682		4,701,682	233,301	
	Reserve and Restricted Funds					
2702.						
2703.						
2798.	Summary of remaining write-ins for Line 27 from overflow page	XXX	XXX			
2799.	Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above)	XXX	XXX	1,500,000	1,500,000	

# STATEMENT OF REVENUE AND EXPENSES

	STATEMENT OF REVENUE A	Current Year		Prior Year To Date		
		1	2	3		
		Uncovered	Total	Total		
1.	Member Months	XXX	711,775	683,831		
			170 000 010	450 040 004		
	Net premium income (including					
3.	Change in unearned premium reserves and reserve for rate credits					
4.	Fee-for-service (net of \$ medical expenses)					
5.	Risk revenue					
6.	Aggregate write-ins for other health care related revenues					
7.	Aggregate write-ins for other non-health revenues					
8.	Total revenues (Lines 2 to 7)	XXX	179,626,918	153,312,841		
	Hospital and Medical:					
9.	Hospital/medical benefits	13,479,912	141,734,365	110,876,018		
10.	Other professional services	400 , 427	3,665,639	3,275,906		
11.	Outside referrals			0		
12.	Emergency room and out-of-area	143 , 125	4,496,039	2,855,459		
13.	Prescription drugs		20 , 536 , 725	17 , 376 , 779		
14.	Aggregate write-ins for other hospital and medical.	0	0	0		
15.	Incentive pool, withhold adjustments and bonus amounts		(2,861,050)	(869,590)		
16.	Subtotal (Lines 9 to 15)	14,023,465	167 , 571 , 719	133,514,572		
	Less:					
17.	Net reinsurance recoveries		4 053	n		
18.	Total hospital and medical (Lines 16 minus 17)					
19.	Non-health claims					
20.	Claims adjustment expenses, including \$ 550,932 cost containment expenses					
21.	General administrative expenses.					
22.	Increase in reserves for life and accident and health contracts including					
	\$increase in reserves for life only)			0		
23.	Total underwriting deductions (Lines 18 through 22)					
24.	Net underwriting gain or (loss) (Lines 8 minus 23)					
25.	Net investment income earned					
26.	Net realized capital gains (losses)					
	Net investment gains (losses) (Lines 25 plus 26)					
	Net gain or (loss) from agents' or premium balances charged off [(amount recovered		2, 100,001			
	\$			0		
29.	Aggregate write-ins for other income or expenses			(2)		
30.	Net income or (loss) before federal income taxes (Lines 24 plus 27 plus 28 plus 29)					
31.	Federal and foreign income taxes incurred					
32.	Net income (loss) (Lines 30 minus 31)	XXX	(3,186,531)			
	DETAILS OF WRITE-INS	7001	(0,100,001)	*******		
0601	Contractual Recoveries	xxx		(4 043)		
0602.	Audit Recoveries.			, ,		
0603.	7.00 TO 1.00 T					
0698.	Summary of remaining write-ins for Line 6 from overflow page			0		
0699.	Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above)	XXX	0	(4,043)		
0701.	Totals (Lines 9001 tind 9005 pius 9050) (Line 9 above)			1 / /		
0701.						
0702.						
0798.	Summary of remaining write-ins for Line 7 from overflow page					
0798.	Totals (Lines 0701 thru 0703 plus 0798) (Line 7 above)	XXX	0	0		
	Totals (Lines 0701 tillu 0703 pius 0790) (Line 7 above)		-	0		
1401.						
1403.						
1498.	Summary of remaining write-ins for Line 14 from overflow page		0	0		
1499.	Totals (Lines 1401 thru 1403 plus 1498) (Line 14 above)	0	0	0		
	Massachusetts Uncompensated Care Surcharge			n		
2901.	Other Income (Loss)			(2)		
2902.	Fines & Penalties - Regulatory Authorities			, ,		
2903. 2998.	Summary of remaining write-ins for Line 29 from overflow page		(92,731)			
2998. 2999.		0	(92,751)			
∠333.	Totals (Lines 2901 thru 2903 plus 2998) (Line 29 above)	U	(32,731)	(2)		

# **CAPITAL AND SURPLUS ACCOUNT**

	CAPITAL AND SURPLUS ACCOUNT	1 Current Year	2
		to Date	Prior Year
	CAPITAL AND SURPLUS ACCOUNT:		
33.	Capital and surplus prior reporting year	73,529,914	79 ,549 ,883
	GAINS AND LOSSES TO CAPITAL & SURPLUS:		
34.	Net income or (loss) from Line 32	(3,186,531).	2,059,637
35.	Change in valuation basis of aggregate policy and claim reserves		0
36.	Net unrealized capital gains and losses	(8,363)	381,692
37.	Change in net unrealized foreign exchange capital gain or (loss)		0
38.	Change in net deferred income tax		0
39.	Change in nonadmitted assets	(4,678,822)	(2,323,016)
40.	Change in unauthorized reinsurance	0	0
41.	Change in treasury stock		0
42.	Change in surplus notes	0	0
43.	Cumulative effect of changes in accounting principles		0
44.	Capital Changes:		
	44.1 Paid in		0
	44.2 Transferred from surplus (Stock Dividend)		0
	44.3 Transferred to surplus		0
45.	Surplus adjustments:		
	45.1 Paid in		1,000
	45.2 Transferred to capital (Stock Dividend)	0	0
	45.3 Transferred from capital		(1,000)
46.	Dividends to stockholders		(6,400,000)
47.	Aggregate write-ins for gains or (losses) in surplus	(226,836)	261,718
48.	Net change in capital & surplus (Lines 34 to 47)	(8,100,552)	(6,019,969)
49.	Capital and surplus end of reporting period (Line 33 plus 48)	65,429,362	73,529,914
	DETAILS OF WRITE-INS		
4701.	Change in Non-Admitted assets Affecting Net Income		506 , 654
4702.	Change in Accrual affecting Net Income	(1,215,581)	(758 , 149)
4703.	Change in GAAP vs Statutory Value of Short Term Investments		
4798.	Summary of remaining write-ins for Line 47 from overflow page	0	0
4799.	Totals (Lines 4701 thru 4703 plus 4798) (Line 47 above)	(226,836)	261,718

Report #2A: TENNCARE OPERATIONS STATEMENT OF REVENUES AND EXPENSES

Report #2A	A: TENNCARE OPERATIONS STA		REVENUES AN	S AND EXPENSES 2003			
		CURRENT	YEAR TO DATE	2003			
		PERIOD	TOTAL	TOTAL			
	MBER MONTHS /ENUES:	243,082	243,082	864,937			
<ol> <li>TennCare C</li> <li>Adverse Sel</li> </ol>	apitation	42,677,174	42,677,174 0	\$168,732,551 0			
	nCare Revenue (Lines 1 and 2)	42,677,174	42,677,174	168,732,551			
4. Investment	,	36,428	36,428	138,258			
	nue (Provide detail)	0	0	168,870,809			
6. TOTAL REV	/ENUES (Lines 3 to 5)	42,713,602	42,713,602	168,870,809			
	PENSES:						
	edical and Hospital Services: hysician Services	0	0	0			
	vice Physician Services	14,149,669	14,149,669	•			
9. Inpatient Ho	spital Services	10,330,235					
10. Outpatient		5,013,463	5,013,463				
	/ Room Services	3,925,502	3,925,502	9,743,375			
<ol> <li>Mental Heat</li> <li>Dental Serv</li> </ol>		(3,901)	(3,901)	0 29,297			
14. Vision Serv		107,943	107,943	545,654			
15. Pharmacy	Services	(1,397)	(1,397)	27,573,368			
16. Home Hea	Ith Services	1,051,025	1,051,025	3,224,831			
17. Chiropracti		0	0	0			
18. Radiology		864,692	864,692	3,649,794			
19. Laboratory	edical Equipment Services	1,352,914 1,449,287	1,352,914 1,449,287	5,142,737 4,486,515			
21. Transporta		402,902	402,902	1,574,448			
22. Outside Re		0	0	0			
	centive Pool and Withhold Adjustments	0	0	(269,371)			
	y, Depreciation, and Amortization	0	0	0			
	ical and Hospital Services (Provide Detail I (Lines 7 to 25)	(9,269) 38,633,065	(9,269) 38,633,065	1,680,353 154,296,116			
LESS:	ii (Lilles 7 to 25)	36,033,003	36,033,003	134,290,110			
	ırance Recoveries Incurred	0	0	0			
28. Copaymen		0	0	0			
29. Subrogatio	n and Coordination of Benefits	0	0	0			
30. Subtota	Il (Lines 27 to 29)	0	0	0			
31 TOTAL ME	DICAL AND HOSPITAL (Lines 26 minus	38,633,065	38,633,065	154,296,116			
Adminis	tration:						
32. Compensa	tion	2,901,796					
33. Marketing		88,246	88,246	· _			
<ol> <li>Interest Ex</li> <li>Premium T</li> </ol>		0 854,272	0 854,272	0 3,377,416			
	/, Depreciation and Amortization	236,222	236,222	1,586,805			
	inistration (Provide detail)	60,000		10,000			
38. TOTAL AD	MINISTRATION (Lines 32 to 37)	4,140,536	4,140,536	14,584,692			
39. TOTAL EX	PENSES (Lines 31 and 38)	42,773,602	42,773,602	168,880,808			
40. Extraordina	ary Item						
41. Provision fo	or Income Tax	(18,000)	(18,000)	(3,000)			
42. NET INCO	ME (LOSS) (Line 6 less Lines 39, 40, and	(\$42,000)	(\$42,000)	(\$7,000)			
Write-ins:							
RE\	/ENUES:						
	tractual Recoveries	0	0	0			
	erral of Revenue for Administration fee Ri	0	0	0			
	PENSES: nsurance Expense	0	0	0			
	seline	22,953	22,953				
Line 25 Risk	Sharing (Option #2) New Risk Arrangen		(32,222)	1,594,474			
	Sharing during Exigency	0	0	0			
Line 37 Fine	es & Penalties- Regulatory Authorities	10,000	10,000	10000			

# **CASH FLOW**

	OASIII LOW	1	2
		Current Year	Prior Year Ended
		To Date	December 31
	Cash from Operations		
1.	Premiums collected net of reinsurance	154,944,550	647 , 415 , 024
2.	Net investment income	2,660,404	7 , 930 , 059
3.	Miscellaneous income	(92,751)	(80,000
4.	Total (Lines 1 to 3)	157,512,203	655, 265, 083
	Benefits and loss related payments		551,706,379
	Net transfers to Separate, Segregated Accounts and Protected Cell Accounts.		
7.	Commissions, expenses paid and aggregate write-ins for deductions	19,365,662	88,343,780
	Dividends paid to policyholders		
9.	Federal and foreign income taxes paid (recovered) \$ net of tax on capital gains (losses)	(2,711,771)	1,585,582
	Total (Lines 5 through 9)	166,716,884	641,635,741
	Net cash from operations (Line 4 minus Line 10)		13,629,342
	Cash from Investments	(*,=*,,**,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
12	Proceeds from investments sold, matured or repaid:		
12.	12.1 Bonds	13 172 375	49 862 440
	12.2 Stocks		
	12.3 Mortgage loans	, ,	(
	12.4 Real estate		
	12.5 Other invested assets		(
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments		(
	12.7 Miscellaneous proceeds		(
	12.8 Total investment proceeds (Lines 12.1 to 12.7)		49 862 440
13	Cost of investments acquired (long-term only):	10, 107, 100	
	13.1 Bonds	12 722 908	84 109 439
	13.2 Stocks		
	13.3 Mortgage loans	_	
	13.4 Real estate		(
	13.5 Other invested assets		(
	13.6 Miscellaneous applications	_	(
	13.7 Total investments acquired (Lines 13.1 to 13.6)	····	84,109,439
1/	Net increase (or decrease) in policy loans and premium notes		04,100,400
			(34,246,999
13.	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	3,701,231	(34,240,333
16	Cash provided (applied):		
10.	Cash provided (applied): 16.1 Surplus notes, capital notes	0	
	16.2 Capital and paid in surplus, less treasury stock		
	16.3 Borrowed funds		
	16.4 Net deposits on deposit-type contracts and other insurance liabilities		
	16.5 Dividends to stockholders		
17	16.6 Other cash provided (applied).	· · · · · · · · · · · · · · · · · · ·	
17.	Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	(304,013)	000,998
10	RECONCILIATION OF CASH AND SHORT-TERM INVESTMENTS	/C 007 40E\	(40 7E2 CFC
	Net change in cash and short-term investments (Line 11 plus Lines 15 and 17)	(6,087,465)	(19,753,658
19.	Cash and short-term investments:	47 040 040	ae aea a <del>a</del> a
	19.1 Beginning of period		
	19.2 End of period (Line 18 plus Line 19.1)	11,122,747	17,210,212

### **EXHIBIT OF PREMIUMS. ENROLLMENT AND UTILIZATION**

EXHIBIT OF PREWIOWS, ENROLLWENT AND UTILIZATION													
	1	Compre (Hospital 8	& Medical)	4	5	6	7	8	9	10	11	12	13
	Total	2 Individual	3 Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Stop Loss	Disability Income	Long-Term Care	Other
Total Members at end of:		a.v.aaa.	a.oup	Gappioment	<u> </u>	J,		.wou.eare	modicald	1000			<b>G</b> (110)
1. Prior Year	225,405	0	193,596	0	0	0	0	22,049	9,760	0	0	0	0
2 First Quarter	239 , 126		206,697					22,312	10 , 117				
3 Second Quarter	0												
4. Third Quarter	0												
5. Current Year	0												
6 Current Year Member Months	711,775		615,104					66,675	29,996				
Total Member Ambulatory Encounters for Period:													
7. Physician	470,255		329,606					7 , 338	133,311				
8. Non-Physician	. 77,181		53,869					442	22,870				
9. Total	547,436	0	383,475	0	0	0	0	7,780	156,181	0	0	0	0
10. Hospital Patient Days Incurred	36,459		33,448					926	2,085				
11. Number of Inpatient Admissions	7,206		6,473					126	607				
12. Health Premiums Written	. 179,812,950		134,622,248				3,194,463	35,630,722	548,211				5,817,306
13. Life Premiums Direct	0												
14. Property/Casualty Premiums Written	0												
15. Health Premiums Earned	179,812,950		134 , 622 , 248				3, 194, 463	35,630,722	548,211				5 ,817 ,306
16. Property/Casualty Premiums Earned	0												
17. Amount Paid for Provision of Health Care Services	154,288,970		107 , 670 , 409		•••••		2,582,484	30,944,306	8,790,119				4,301,652
18. Amount Incurred for Provision of Health Care Services	167,571,719		120,080,292				3,094,485	35,060,385	4,593,785				4,742,772

# **CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)**

Aging Analysis of Unpaid Claims											
1	2	3	4	5	6	7					
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total					
Claims Unpaid (Reported)											
	<b>†</b>										
	•										
0199999 Individually Listed Claims Unpaid	0	0	0	0	0	0					
0299999 Aggregate Accounts Not Individually Listed-Uncovered						0					
0399999 Aggregate Accounts Not Individually Listed-Covered	0	0	0	0	0	0					
0499999 Subtotals	VVV	VVV	VVV	VVV	VVV	06 424 F24					
0599999 Unreported Claims and Other Claim Reserves	XXX	XXX	XXX	XXX	XXX	86,421,524					
0699999 Total Amounts Withheld						24,289,361					
0799999 Total Claims Unpaid	XXX	XXX	XXX	XXX	XXX	110,710,885					
0899999 Accrued Medical Incentive Pool and Bonus Amounts	XXX	XXX	XXX	XXX	XXX	937,219					

# **UNDERWRITING AND INVESTMENT EXHIBIT**

ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE												
	Claims Liability Paid Year to Date End of Current Quarter											
					5	6						
Line of Business	On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	3 On Claims Unpaid Dec. 31 of Prior Year	4 On Claims Incurred During the Year	Claims Incurred in Prior Years (Columns 1 + 3)	Estimated Claim Reserve and Claim Liability Dec. 31 of Prior Year						
Comprehensive (hospital & medical)	61,189,947	65,613,965	30 , 153 , 333	49 , 420 , 442	91,343,280	61,121,623						
Medicare Supplement					0	0						
3. Dental Only					0	0						
4. Vision Only					0	0						
5. Federal Employees Health Benefits Plan	1,479,823	1,564,529	729,000	1,194,000	2,208,823	1,477,000						
6. Title XVIII - Medicare	15,853,987	4 , 541 , 644	8,143,320	17 ,848 ,827	23,997,307	24 , 167 , 016						
7. Title XIX - Medicaid	2,644,722	989,916	673,711	2,548,251	3,318,433	6 , 549 , 457						
8. Other Health	3,096,284	2,332,399			3,096,284	0						
9. Health Subtotal (Lines 1 to 8)	84,264,763	75,042,453	39,699,364	71,011,520	123,964,127	93,315,096						
10. Other non-health					0	0						
11. Medical incentive pools and bonus amounts	66 ,730	(9,884,076)		937 , 219	66 ,730	255,210						
12. Totals	84,331,493	65,158,377	39,699,364	71,948,739	124,030,857	93,570,306						

### **NOTES TO FINANCIAL STATEMENTS**

### 17c. Wash Sales

The plan did not engage in wash sales.

Events having occured subsequent to the end of the most recent fiscal year which have a material impact on John Deere Health Plan, Inc.:

Please see general interrogatory question six. John Deere Health Plan service agreement with John Deere Health Care was amended retroactive to January 1, 2004.

Litigation judgment- John Deere Health Plan received a judgment in March 2004 resulting from a lawsuit against the Plan. The State of Iowa sued certain contractors who provided services for the State's Medicaid program over alleged errors which allegedly resulted in overpayments to the Plan. Those contractors filed a cross-petition against the Plan. The claim, in equity, is premised on the theory that the Plan was unjustly enriched by the alleged overpayments from the State resulting from the contractor's error. The Plan has recorded this \$4.3 million judgment in the first quarter 2004.

### **GENERAL INTERROGATORIES**

(Responses to these interrogatories should be based on changes that have occurred since the prior year end unless otherwise noted.)

# PART 1 - COMMON INTERROGATORIES GENERAL

1.1			accounting policy changes which would r					Yes	[]	No [X]
1.2	If yes, explain:									
2.1	Domicile, as required l	by the Model Act?	nsactions requiring the filing of Disclosu							No [X]
3.1	Has any change been		Vana	r 1	Na IVI					
3.2								res	[ ]	No [X]
			opy of the instrument as amended.							
4.	Have there been any s	substantial changes in the or	ganizational chart since the prior quarte	r end?				Yes	[X]	No [ ]
	If yes, complete the So	chedule Y - Part 1 - organiza	tional chart.							
5.1	Has the reporting entit	y been a party to a merger o	r consolidation during the period covere	d by this sta	tement?			Yes	[]	No [X]
5.2		ne of entity, NAIC Company esult of the merger or consoli	Code, and state of domicile (use two lettidation.	er state abb	reviation) for	any entity tha	t has			
			1 Name of Entity	NAIC C	2 ompany Code	State of I				
			Name of Entity							
6.		ent, have there been any sig	ngreement, including third-party administ gnificant changes regarding the terms of					Yes [X] No	[]	NA [ ]
7.1	State as of what date t	the latest financial examinati	on of the reporting entity was made or is	being made	ə				12/	31/2002
7.2			nation report became available from eith sheet and not the date the report was co						06/	30/1998
7.3	the reporting entity. Th	is is the release date or com	on report became available to other stat apletion date of the examination report a	nd not the d	ate of the exa	mination (bal	ance sheet		08/	11/1999
7.4	By what department or	departments?								
0.4	Illinois Department		kl							
8.1	or revoked by any gov	ernmental entity during the r	thority, licenses or registrations (includin eporting period? (You need not report a	n action, eit	her formal or i	informal, if a		Yes	[]	No [X]
8.2	If yes, give full informa									
9.1	Is the company a subs		pany regulated by the Federal Reserve					Yes	[]	No [X]
9.2	If response to 9.1 is ye	es, please identify the name	of the bank holding company.							
9.3	Is the company affiliate	ed with one or more banks, t	hrifts or securities firms?					Yes	[]	No [X]
9.4	If response to 9.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Office of Thrift Supervision (OTS), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.									
		1	2 Location		3	4	5	6		7
		ate Name	(City, State)		FRB	OCC	OTS	FDIC	5	SEC

# GENERAL INTERROGATORIES INVESTMENT

	Has there been any ch	as there been any change in the reporting entity's own preferred or common stock?									
	for use by another pers	s, bonds, or other assets o son? (Exclude securities u nplete information relating	nder securities le						Yes [ ]	No [X]	
12.	Amount of real estate a	and mortgages held in othe	er invested asse	ts in Schedule	e BA:			\$		0	
13.	Amount of real estate	and mortgages held in sho	rt-term investme	nts:				\$		0	
14.1	Does the reporting er	ntity have any investments	in parent, subsid	liaries and affi	iliates?				Yes [ ]	No [X]	
14.2	If yes, please comple	te the following:									
14.21	1 Bonds				. \$ .	1 Prior Year-End Statement Value		2 Current Quarter Statement Value			
14.22 14.23	2 Preferred Stock				. \$		:				
14.24 14.25	Mortgages, Loans of	ents r Real Estate			\$ .		\$				
14.26 14.27	7 Total Investment in I	Parent, Subsidiaries and A	ffiliates (Subtota	l Lines 14.21							
14.28 14.29	3 Total Investment in I	Parent included in Lines 14 rent not included in Lines 1	1.21 to 14.26 abo	ove	. \$		\$				
15.1		y entered into any hedging							Yes [ ]	No [X]	
15.2	If yes, has a comprehe	ensive description of the he	dging program b	een made av	ailable to the	domiciliary state?			Yes [ ]	No [ ]	
	If no, attach a descripti	ion with this statement.									
16.	deposit boxes, were all qualified bank or trust	nedule E, real estate, morto I stocks, bonds and other s company in accordance wi aminers Handbook?	securities, owner th Part 1 - Gene	d throughout thral, Section IV	he current ye: /.H - Custodia	or held pursuant to a lor Safekeeping A	a custodial ag greements of	reement with a the NAIC	Yes []	No [X]	
16.1	For all agreements that	t comply with the requirem	ents of the NAIC	Financial Co	ndition Exam	ners Handbook, co	omplete the fol	llowing:			
			1			2					
		Name o	f Custodian(s)			Custodian					
16.2	For all agreements tha location and a complet	t do not comply with the re te explanation:	quirements of th	e NAIC Finan	cial Condition	Examiners Handb	ook, provide t	he name,			
		1 Name(s)		2 Location	(s)	Comple	3 ete Explanatio	on(s)			
		Mellon Bank	Pittsb	urgh, PA		The custodial ac and amended to regarding notif state commission internal contro adequate insurar	greement wil include a sta ication of te ner, reportin Is, and langu	I be updated atement ermination to age on uage about			
			l I			I					
	·	changes, including name cl	· ·	stodian(s) ide	ntified in 16.1	during the current of	quarter?		Yes [ ]	No [X]	
16.4	If yes, give full and con	nplete information relating									
		1 Old Custodian	2 New Cus	todian	3 Date of Ch	ange	4 Reason				
16.5		advisors, brokers/dealers or rities and have authority to					ss to the inves	stment			
		1 Central Registratio	n Depository	Na	2 ame(s)		3 Addres	s			

# GENERAL INTERROGATORIES INVESTMENT

4. Explanation for Change in Organizational Chart:

A new company, John Deere FoodOrigins, Inc. was added, Work Fitness Center was sold, and Deere & Company's ownership of Nortrax, Inc. has changed to 60% from 40%. These changes have no effect on John Deere Health Plan, Inc.

6. Explanation for Change in Management Agreement:

John Deere Health Plan, Inc will pay to John Deere Health Care, Inc (JDHC) a monthly fee for administrative services. This fee will be paid monthly based on membership by each line of business (Commercial Insured, Medicare) at an established per member per month (PMPM) basis. Tenncare administrative fees will be paid to JDHC based on the Tenncare contract effective at the time. Any subsequent amendments to the Tenncare contract will also be deemed to be in effect for this service agreement related to administrative fees. The membership used for the calculation will be capitation count for the current month as extracted from the monthly membership file, which is available around the 15th of each month.

The fee by line of business will be initially determined annually (January of each year) based on John Deere Health Care's actual cost to administer the business for the most recent fiscal year as well as the projections for the upcoming year. This rate will factor in any inflationary adjustments, changes in business operations, and a profit margin. The rate will be reveiwed proactively and will be adjusted to actual no less than annually.

This will be applied retroactively to January 1, 2004.

Prior to January 1, 2004, administration fees were paid based on a percentage of premiums.

# **SCHEDULE A - VERIFICATION**

NONE	1 Year to Date	2 Prior Year Ended December 31
Book/adjusted carrying value, December 31 of prior year	0	0
2. Increase (decrease) by adjustment		0
3. Cost of acquired		0
Cost of additions to and permanent improvements		0
5. Total profit (loss) on sales		0
Increase (decrease) by foreign exchange adjustment		0
7. Amount received on sales		0
Book/adjusted carrying value at end of current period	0	0
9. Total valuation allowance		0
10. Subtotal (Lines 8 plus 9)	0	0
11. Total nonadmitted amounts		0
12. Statement value, current period (Page 2, real estate lines, Net Admitted Assets column)	0	0

# **SCHEDULE B – VERIFICATION**

	1	2
	Year to Date	Prior Year Ended December 31
<b>NAME</b>	rear to Date	December 31
1. Book/adjusted carrying value, December 31 of prior year	0	0
2. Amount loaned during period:		
2.1. Actual cost at time of acquisitions		0
2.2. Additional investment made after acquisitions		0
3. Accrual of discount and mortgage interest points and commitment fees.		U
4. Increase (decrease) by adjustment		0
4. Increase (decrease) by adjustment 5. Total profit (loss) on sale 6. Amounts paid on account or in full during the period		0
Amounts paid on account or in full during the period		0
7. Amortization of premium		0
Amortization of premium     Increase (decrease) by foreign exchange adjustment		0
9. Book value/recorded investment excluding accrued interest on mortgages owned at end of current period	0	0
10. Total valuation allowance		0
11. Subtotal (Lines 9 plus 10)		0
12. Total nonadmitted amounts		0
13. Statement value of mortgages owned at end of current period (Page 2, mortgage lines, Net Admitted Assets		
column)	0	0

### **SCHEDULE BA – VERIFICATION**

Other Invested Assets Included in Schedule BA

	1	2
	Year to Date	Prior Year Ended December 31
	1001 10 2010	December e1
<ol> <li>Book/adjusted carrying value, December 31 of prior year</li> <li>Cost of acquisitions during period:</li> </ol>		
2.1. Actual cost at time of acquisitions		0
2.2. Additional investment made after acquisitions		0
Accrual of discount		0
4. Increase (decrease) by adjustment		0
5. Total profit (loss) on sale		0
Amounts paid on account or in full during the period		0
7. Amortization of premium		0
Amortization of premium		0
Book/adjusted carrying value of long-term invested assets at end of current period	0	0
10. Total valuation allowance		0
		0
11. Subtotal (Lines 9 plus 10)		0
13. Statement value of long-term invested assets at end of current period (Page 2, Line 7, Column 3)	0	0

# **SCHEDULE D - VERIFICATION**

	1	2
	Veer to Date	Prior Year Ended
	Year to Date	December 31
Book/adjusted carrying value of bonds and stocks, December 31 of prior year		128,811,095
Cost of bonds and stocks acquired	.:	84,111,945
Accrual of discount		495,999
Increase (decrease) by adjustment	(12,867)	587,217
Increase (decrease) by foreign exchange adjustment		0
6. Total profit (loss) on disposal		365,655
Consideration for bonds and stocks disposed of		49,862,440
8. Amortization of premium	130.207	491,700
Book/adjusted carrying value, current period		164,017,771
10. I otal valuation allowance		0
11. Subtotal (Lines 9 plus 10)		164,017,771
12. Total nonadmitted amounts		0
13. Statement value	160,711,049	164,017,771

### **SCHEDULE D - PART 1B**

Showing the Acquisitions, Dispositions and Non-Trading Activity

		During the Current C						
	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. Class 1	174,110,467	43 , 521 , 964	48 , 891 , 471	945 , 058	169,686,018	0	0	174,110,46
2. Class 2	3,882,279		743,177	(991,325)	2,147,777	0	0	
3. Class 3	0				0	0	0	
4. Class 4	0				0	0	0	
5. Class 5	0				0	0	0	
6. Class 6	0				0	0	0	
7. Total Bonds	177,992,746	43,521,964	49,634,648	(46,267)	171,833,795	0	0	177,992,746
PREFERRED STOCK								
8. Class 1	0				0	0	0	
9. Class 2	0				0	0	0	
10. Class 3	0				0	0	0	
11. Class 4	0				0	0	0	
12. Class 5					0	0	0	
13. Class 6	0				0	0	0	
14. Total Preferred Stock	0	0	0	0	0	0	0	
15. Total Bonds and Preferred Stock	177,992,746	43,521,964	49,634,648	(46,267)	171,833,795	0	0	177,992,746

# **SCHEDULE DA - PART 1**

Short-Term Investments Owned End of Current Quarter

	1	2	3	4	5
					Paid for Accrued
	Book/Adjusted			Interest Collected	Interest
	Carrying Value	Par Value	Actual Cost	Year To Date	Year To Date
8299999 Totals	11,122,747	XXX	11,122,747	1,120	

# **SCHEDULE DA - PART 2- Verification**

Short-Term Investments Owned

	1	2
	Year To Date	Prior Year Ended December 31
Book/adjusted carrying value, December 31 of prior year	17,210,212	37 ,477 ,083
Cost of short-term investments acquired	30,850,827	81,630,294
Increase (decrease) by adjustment	(1,310)	(1,740)
Increase (decrease) by foreign exchange adjustment		0
Total profit (loss) on disposal of short-term investments		0
Consideration received on disposal of short-term investments	36,936,981	101,895,425
7. Book/adjusted carrying value, current period	11,122,748	17,210,212
8. Total valuation allowance		0
9. Subtotal (Lines 7 plus 8)	11,122,748	17,210,212
10. Total nonadmitted amounts		
11. Statement value (Lines 9 minus 10)	11,122,748	17,210,212
12. Income collected during period	36,087	203,885
13. Income earned during period	31,085	208,887

Schedule DB - Part F - Section 1

NONE

Schedule DB - Part F - Section 2

**NONE** 

Schedule S

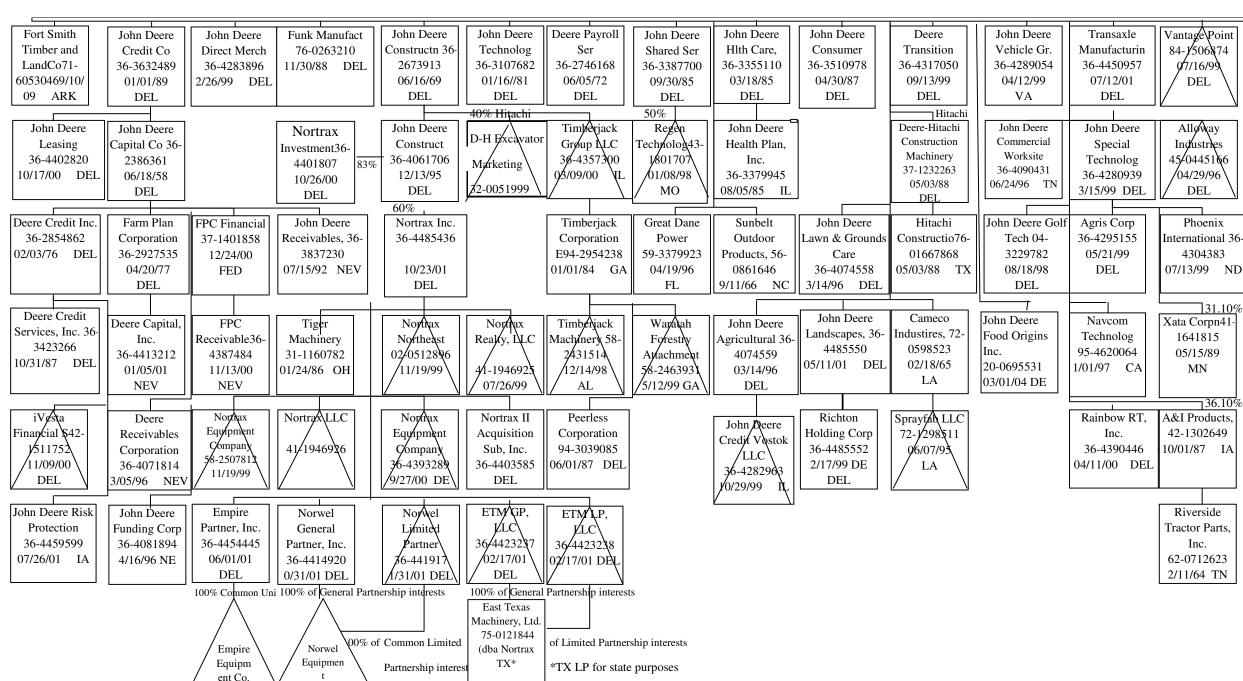
NONE

# SCHEDULE T PREMIUMS AND OTHER CONSIDERATIONS

			1	2	States and Ter		irect Business (	Only Year-to-Da	te	
			Guaranty	ls Insurer	3 Accident and	4	5	6 Federal Employees Health Benefit	7 Life and Annuity Premiums and Deposit-Type	8 Property/
	0		Fund	Licensed?	Health	Medicare	Medicaid	Program	Contract	Casualty
	States, Etc.	•	(Yes or No)	(Yes or No)	Premiums	Title XVIII	Title XIX	Premiums	Funds	Premiums
	Alabama			No No						
	Arizona			No						
	Arkansas			No						
	California			No						•
				No						
	Connecticut			No						
	Delaware			No						
	District of Columbia			No						
	Florida			No						
	Georgia			No						
	Hawaii			No						
	Idaho			No						
	Illinois		Yes	Yes		387				
	Indiana			No	20 , 1 10 , 000					
_	lowa		No	Yes	57,856,470	616,465				
	Kansas			No						
	Kentucky			No						
	Louisiana			No						
	Maine			No.						
	Maryland			No						
	Massachusetts			No						
	Michigan			No.						
	Minnesota			No						
	Mississippi			No						
	Missouri			No						
27.	Montana	MT		No						
28.	Nebraska	NE		No						
29.	Nevada	NV		No						
30.	New Hampshire	NH		No						
	New Jersey	NJ		No						
32.	New Mexico	NM		No						
33.	New York	NY		No						
34.	North Carolina	NC		No						
35.	North Dakota	ND		No						
36.	Ohio	OH		No						
37.	Oklahoma	OK		No						
38.	Oregon	OR		No						
39.	Pennsylvania	PA		No						
	Rhode Island			No						
	South Carolina		No	No						
42.	South Dakota	SD		No						
	Tennessee		No	Yes		29,043,432				
	Texas			No						
	Utah			No						
	Vermont			No						
	Virginia		No		6,062,516	5,970,327				<b>-</b>
	Washington			No						
	West Virginia			No					<b></b>	<b></b>
	Wisconsin			No					<b></b>	<b></b>
	Wyoming			No					<b>.</b>	<b>.</b>
	American Samoa		<b>.</b>						<b> </b>	<b> </b>
	Guam								<b></b>	<b></b>
	Puerto Rico									
	U.S. Virgin Islands		<b></b>				l		<b> </b>	<del> </del>
	Canada							-		
	Aggregate Other Alien	OT	XXX	XXX	0	0	0	0	I0	
58.	Total (Direct Business)		XXX	(a) 4	139,719,665	35,630,611	548,211	3,914,463	0	
- <b>-</b>	DETAILS OF WRITE-INS									
									<b>!</b>	<b>!</b>
702.										
								^		<b>†</b>
	Summary of remaining write-ins for L			e		0	0	0	0	
	Totals (Lines 5701 thru 5703 plus 579	98) (Line 5	7 above)		0	0	0	0	0	

<sup>(</sup>a) Insert the number of yes responses except for Canada and Other Alien.

# SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP PART 1 - ORGANIZATIONAL CHART



# SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of **NO** to the specific interrogatory will be accepted in lieu of filing on "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter **SEE EXPLANATION** and provide an explanation following the interrogatory question.

	RESPONSE
1. Will the SVO Compliance Certification be filed with this statement?	YES
Explanation:	
Bar Code:	

# **OVERFLOW PAGE FOR WRITE-INS**

2104. Accounts Payable - Other 4,503,816 4,503,816 80	MQ003 Additional Aggregate Lines for Page 03 Line 21. *LIAB				
	2104. Accounts Payable - Other	4,503,816		4,503,816	80,000
2197. Summary of remaining write-ins for Line 21 from Page 03 4,503,816 0 4,503,816 80	2197. Summary of remaining write-ins for Line 21 from Page 03	4,503,816	0	4,503,816	80,000

Schedule A - Part 2

NONE

Schedule A - Part 3
NONE

Schedule B - Part 1
NONE

Schedule B - Part 2
NONE

Schedule BA - Part 1
NONE

Schedule BA - Part 2

NONE

# **SCHEDULE D - PART 3**

Show All Long-Term Bonds and Stock Acquired by the Company During the Current Quarter

			SHOW All LOI	g-Term Bonds and Stock Acquired by the Company Di	aring the current Quarter				
1	2	3	4	5	6	7	8	9	10
									NAIC
									Designation or
CUSIP					Number of	Actual		Paid for Accrued	Market
Identification	Description	Foreign	Date Acquired	Name of Vendor	Shares of Stock	Cost	Par Value	Interest and Dividends	Indicator (a)
BONDS	Description	1 Oreign	Date Acquired	Name of Vendor	Shales of Stock	COSI	Fai value	interest and Dividends	Indicator
US Governments									
United States									
	F11:- M 4 FF0W 04/00/44	D	04 /00 /0004	NDC Comital Madesta Consum		4 000 000	4 000 000		T 4
	Freddie Mac 4.550% 01/20/11 FHLMC 4.500% 01/15/14	<u>J</u>	01/06/2004	NBC Capital Markets Group		1,000,000	1,000,000		
		<u>D</u>	01/14/2004	Salomon Smith Barney (Bonds) NBC Capital Markets Group		998,490	1,000,000	3,706	
	Fannie Mae 4.000% 06/08/09			NBC Capital markets Group.					
	United States					3,146,693	3,150,000	3,706	
	- Bonds - U.S. Government					3,146,693	3,150,000	3,706	XXX
Special Revenue & Ass	sessment								
United States						-			
31392F -FA -0	FNMA 2002-73 OD 5.000% 06/25/13	<u>D</u>	01/08/2004	Salomon Smith Barney (Bonds)		1,020,313	1,000,000		1
31392J-LB-3	FNMA 2003-15 CN 5.000% 03/25/18 FHLMC 2617-TK 4.500% 05/15/18	<u>D</u>	02/19/2004	Salomon Smith Barney (Bonds)		986,294	995,000		11
31393R - BS - 8	FHLMC 2617-TK 4.500% 05/15/18	D	01/22/2004	Salomon Smith Barney (Bonds)		973,438	1,000,000		11
31393U-L4-3	FNMA 2003-129 ME 5.000% 08/25/23	D	01/26/2004	Salomon Smith Barney (Bonds)		992,813	1,000,000		11
	FHLMC 2644-BC 5.000% 10/15/31	D	02/18/2004	Salomon Smith Barney (Bonds)		996,875	1,000,000		
31394M-MJ-6	FHLMC 2716-GH 5.000% 04/15/32	D		NBC Capital Markets Group		1,652,895	1,656,000	6,210	
31394N-VE-5	FHLMC 2733-YL 5.500% 06/15/33	D	01/29/2004	Salomon Smith Barney (Bonds)		923,266	925,000	4,098	
	GNMA 2003-77 TG 5.000% 05/16/30	D	01/09/2004	Salomon Smith Barney (Bonds)		1,015,313	1,000,000	1,806	
	United States					8,561,204	8,576,000	27,153	XXX
3199999 - Total	- Bonds - Special Revenue					8,561,204	8,576,000	27,153	XXX
Industrial & Miscella	aneous								
United States									
22541L - AM - 5	Credit Suisse FB 5.125% 01/15/14	D.	01/23/2004	Salomon Smith Barney (Bonds)		1,015,010	1,000,000	2,705	1FE
Total	United States		•	· ,	•	1.015.010	1.000.000	2.705	XXX
4599999 - Total	- Bonds - Industrial, Misc.					1,015,010	1,000,000	2,705	XXX
6099997 - Total						12.722.908	12.726.000	33.564	
6099999 - Total						12,722,908	12,726,000	33,564	
	- Preferred Stocks					12,722,000	XXX	0	XXX
COMMON STOCK	- ITCTCTTCG OTOCKS					0	AAA	0	۸۸۸
Industrial & Miscella	aneous								
United States	anous								
	Medco Health Solutions, Inc. Common Stock	n n	09/02/2003	Spin Off	458.280				<del></del>
	United States	V		opili vii	400.200		VVV		XXX
						13,359	XXX	0	
	- Common Stocks - Industrial, Misc.					13,359	XXX	0	XXX
	- Common Stocks - Part 3					13,359	XXX	0	XXX
7299999 - Total						13,359	XXX	0	XXX
	- Preferred and Common Stocks					13,359	XXX	0	XXX
7499999 - Totals						12,736,266	XXX	33,564	XXX
	I I I I I NIAIO I II I II II II II I							· · · · · · · · · · · · · · · · · · ·	

<sup>(</sup>a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues

# **SCHEDULE D - PART 4**

						Show All Lo	na-Term Boi	nds and Stoc	k Sold, Rede	emed or Oth	erwise Dispos	ed of by the C	ompany Durin	a the Curren	t Quarter						
1	2	3	4	5	6	7	8	9	10			Book/Adjusted Ca		.go oao	16	17	18	19	20	21	22
										11	12	13	14	15							
		F o r e							Prior Year	Unrealized		Current Year's Other Than		Total Foreign	Book/ Adjusted	Foreign			Bond Interest/Stock		NAIC Desig- nation or
CUSIP Identi-		i	Disposal		Number of Shares of				Book/Adjusted Carrying	Valuation Increase/	Current Year's (Amortization)/	Temporary Impairment	Total Change in B/A. C.V.	Exchange Change in	Carrying Value	Exchange Gain (Loss) on	Realized Gain (Loss) on	Total Gain (Loss) on	Dividends Received	Maturity	Market Indicator
fication	Description	n	Date	Name of Purchaser	Stock	Consideration	Par Value	Actual Cost	Value	(Decrease)	Accretion	Recognized	(11 + 12 - 13)	B/A. C.V.	Disposal Date	Disposal	Disposal	Disposal	During Year	Date	(a)
BONDS US Governmen United State	es	1			,						_										
3128X0-UR-8		D.	01/07/2004.	. Call 100.0000		1,000,000	1,000,000	996,875	997,427		15		15		997 , 441		2,559	2,559	17,515	01/07/2008	1
3133X0-ZE-2.	Federal Home Loan Bank 4.000% 09/23/10 GNMA Pool #0196468	D	03/23/2004.	. Call 100.0000		1,000,000	1,000,000	1,000,000	999,951		49		49		1,000,000			0	20,049	09/23/2010	
36217L-FH-4.		D	03/01/2004.	. Paydown		4,642	4,642	4,793	4,655		(12)		(12)		4,642			0	65	11/15/2004	1
36218S-SV-3	9.000% 07/15/17 GNMA Pool #0276362	D	03/01/2004	Paydown	<b></b>	117	117	117	117		1		1		117			0	2	07/15/2017	1
36220E-5X-1.	9.500% 09/15/04 GNMA Pool #0283327	D	03/01/2004.	Paydown	<b> </b>	725	725	743	724		1		1		725			0	12	09/15/2004	1
36220N-VU-8.		D	03/01/2004.	. Paydown		170	170	170	170				0		170			0	2	12/15/2019	1
36220Y-KL-6.	9.000% 10/15/05	D	03/01/2004.	Paydown		555	555	557	556		(1)		(1)		555			0	7	10/15/2005	
0300000 -	Total United States Bonds - U.S. Governments					2,006,210 2,006,210	2,006,210 2,006,210	2,003,255 2,003,255	2,003,599 2,003,599	0	53 53		53 53	0	2,003,651 2,003,651	0	2,559 2,559	2,559 2,559	37,654 37,654	XXX	XXX
	Virginia St Hsg Dev Auth	1				,,,,,				0				0		0	,,,,,	·			
Special Reve	Comwl 5.740% 04/01/07 enue & Assessment	.   .D.	03/01/2004	. Call 100.0000	ļ	335,000	335,000	330,605	332,426		134	ļ	134	ļ	332,560	ļ	2,440	2,440	8,146	04/01/2007	1FE
United State	FHLMC 1369- H 6.500%		00/04/0004			00.450	00.450	20.050	07.007		555		555		00.450				4 000	00/45/0007	
312911-T8-3.	FHLMC 1385-H 6.500%	D	03/01/2004.	Paydown		68,452	68,452		67,897		555		555					0	1,296	09/15/2007	1
312912-KD-9.	FHLMC 1449 H 7.000%	DL	03/01/2004.	Paydown		58,446	58,446	57 , 421	58,111				335		58,446			0	974	08/15/2007	1
312913-4Q-6.	FHLMC 1490 - PH 6.250%	D	03/01/2004.	Paydown				, , , , , , , , , , , , , , , , , , , ,	59,888		792		416						1,120	12/15/2007	
312915-DN-8.	04/15/08	U	03/01/2004.	Paydown		101,860 164,092	101,860	100,507	101,067		1,383		1,383		164,092				1,843	04/15/2008	
31339L -SR - 2	04/15/15 FHLMC 2391 QL 5.500%	U		Paydown	<b>†</b>	·	164,092	160,810	162,709		946		946					0	2,925	04/15/2015	
31339L-WP-1. 3133T3-TB-4.	12/15/13 FHLMC 1658 GB 7.000% 08/15/05.	U	03/01/2004.	Paydown		266,207	266,207	264,377	265,261						266,207				3,609	12/15/2013	
3133T6-QQ-7	FHLMC 1808-A 5.000% 10/15/07	D	02/01/2004.	Paydown.		40,583	40,583	38,081			(0,022)		(0,022)		40,583				1,041	10/15/2005	
3133TC-DZ-8.	FHLMC 2013 PA 5.500%	b	03/01/2004.	Paydown	***************************************	47,526	47,526		47,331		195	***************************************	195		40,583	***************************************		٥	622	09/15/2007	1
3133TE-B5-2.	FHLMC 2063-PE 5.750%	n	02/01/2004.	,		57 ,499	57 ,499		57 , 150		349		349						730	07/15/2026	1
3133TR-5M-3.	FHLMC 2280-VA 6.000% 06/15/07	b	03/01/2004.	,		26,638	26,638	27 , 125	26,972		(333)		(333)		26,638			Λ	(66)	06/15/2007	
3133TT-M8-1	FHLMC 2315 K 6.000% 05/15/11	D.	03/01/2004.	,		209,202	209,202	204,870	208,257		944		944		209,202			0		05/15/2011	1
31358T - TB - 5.	FNMA 1993-014- A 6.0009	6 D	03/01/2004.	Paydown		15,291	15,291	15,191	15,226		65		65					0	216	02/25/2008	1
31359A-EG-0.	FNMA 1993-93 G 6.750%	D.	03/01/2004.	. Paydown		53,224	53,224	53,499	53,206		18		18		53,224			0	611	05/25/2008	
31359A - YR - 4.	FNMA 1993-87 KE 6.000% 09/25/08	D.	03/01/2004.	Paydown		217 , 422	217 ,422	206,959	215,638		1,784		1,784		217 , 422			0	3,864	09/25/2008	
31359N-AR-2.	FNMA 1996-64 PK 6.500% 05/18/11	D.	03/01/2004.	Paydown					84,754		400		400					0	1,297	05/18/2011	
31359U-YR-0.	FNMA 1998-58 VB 6.000% 05/25/14	D.	03/01/2004.	. Paydown		475,271	475,271	464,281	470,201		5,070		5,070		475,271			0	10 , 154	05/25/2014	1
31392A-WT-1.	FNMA 2001-71 EC 6.000% 08/25/27	D.	03/01/2004.	,		133,664	133,664	132,181	132,752		.912		.912		133,664			0	2,917	08/25/2027	11

# SCHEDULE D - PART 4 Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of by the Company During the Current Quarter

-	3	Ľ	9	2 2	α α		10 Change			in Book/Adjusted Carry	in Book/Adiusted Carrying Value	16	16	17	18	10	06	21	22
-	)	)	>	-	o ·	·	2	÷				Ť.	2	=	2	2	2	- -	1
	шо⊳							=		urrent Year's	<u>+</u>	2	Book/				Bond		NAIC Desig-
CUSIP Identi- fication Description	e i g Disposal n Date	I Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Br Actual Cost	Prior Year Book/Adjusted Carrying Value	Unrealized Valuation Cluckase/ (A	Current Year's (Amortization)/	Other Than Temporary Impairment Recognized	Total Change in B/A. C.V. (11 + 12 - 13)	Total Foreign Exchange Change in B/A. C.V.	d 'alue Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Interest/Stock Dividends Received During Year	Maturity In	or Market Indicator (a)
8 09/25/	D 03	. Pa		149,171		150,547	149,005	,	166	+			149,171			0	1,676	)14.	1
38373W-AV-0_11/20/27	ou% D 01/01/2004	J4 Paydown		17,373	17,373	17,835	17,368		5		5		17,373			0	95	11/20/2027	1
				3,248,011	3,248,011	3,230,442	3,239,558	0	6,014	0	6,014	0	3,245,572	0	2,440	2,440	42,261	XXX	XXX
Public Utilities (unaffiliated)	Sal			3,248,011	3,248,011	3,230,442	3,239,336	O	0,014	D	0,014	D	3,245,512	D	7,440	7,440	107,20	VVV	γγγ
Wisconsin Energy Corp. 976657-AD-8 5.500% 12/01/08	D 03/05/2004	NBC Capital Markets Group		815.783	750.000	740.738	742.971		206		206		743.177		72.606	72.606	11.550	12/01/2008	2FF
Total United States				815,783	750,000	740,738	742,971	0	206	0	206	0	743,177	0	72,606	72,606	11,550	XXX	XXX
Miscellaneous	3				000,000	001,041	145,311		007		007		11.04		000,27	72,000	000,11	VVV	WW
Cardinal Health Inc. 14149Y-AC-2. 4.450% 06/30/05.	.03/05/2004.	04. NBC Capital Markets Group.		517,940	200,000	496,675	498,474		160		160		498,634		19,306	19,306	4,486	.06/30/2005.	-
Mortgage Cor 5.650% 3134A2-2W-7. 02/02/06.	D_03/05/2004_	04 NBC Capital Markets Group		2,465,462	2,300,000	2,159,195	2,241,305		4,869		4,869		2,246,174		219,288	219,288	82,839	.02/02/2006.	-
International Business   459200-AW-1Machine	ss 1/06 D 03/05/2004	04 Craigie (Bonds)		1,066,790	1,000,000	1,021,910	1,012,885		(815)		(815)		1,012,070		54,720	54,720	20,716	10/01/2006	1FE
Morgan Stanley Dean Witter Di 3.625% 617446-HW-2 04/01/08	D 03/05/2004.	Salomon Smith Barney 34. (Bonds)		1.022.620	1.000.000	1.000.760	1.000.659		(9)		(9)		1.000.653		21.967	21.967	16.005	04/01/2008	_
Procter & Gamble Co. 742718-BV-0. 4.000% 04/30/05.	0			1,029,560	1,000,000	998,700	999,427		79		79		905, 666		30,054	30,054	14,523	.04/30/2005.	1FE
Stanley Works 5.750% 854616-AF-6. 03/01/04.	D			1,000,000	1,000,000				1,893		1,893		1,000,000			0	30,643	.03/01/2004	1FE
Total United States 4599999 - Ronds - Industrial and	Wiscellaneous			7,102,372	6,800,000	6,640,190	6,750,857	00	6, 180	0	6,180	0	6,757,038	0	345,335	345,335	169,213	XXX	XXX
- Bonds - Part 4						,614,6		0	12,453	0	12,453	0	,749,	0	422,938	422,938	260,677	XXX	XXX
6599999 - Total - Bonds 6599999 - Total - Preferred Stock	ķs			13,172,375	12,804,221 XXX	12,614,624	12,736,984	0 0	12,453	0	12,453	0	12,749,437	0	422,938	422,938	7,9,092	XXX	XXX
COMMON STOCK Banks, Trust & Insurance Companies United States				-	-	-	-	-		-	-		-			-		-	
020002-10-1 Stock		04 Spear, Leeds & Kellogg	5,000.000	213,140		200,290	215,100	(14,810)			(14,810)		200,290		12,850	12,850	1,200		7
100 100 1an Ch	D 01/07/2004	34. Spear, Leeds & Kellogg	9,200.000	1,067,672		982,032	1,058,552	(76,520)			(76,520)		982,032		85,639	85,639	430		_
n Stock. United States		04. Spear, Leeds & Kellogg	6,000.000	1,507,271	XXX	266,085	220,380 1,494,032	45,705 (45,625)	0	0	45,705 (45,625)	0	266,085	0	(39,625)	(39,625) 58,864	2,040	XXX	√XXX
6799999 - Common Stocks - Banks, Industrial & Miscellaneous	Trust	and Insurance Companies		1,507,271	XXX	1,448,407	1,494,032	(42,625)	0	0	(45,625)	0	1,448,407	0	58,864	58,864	3,670	XXX	XXX
FPL Group Inc Common	_																		
302571-10-4. Stock	ock. D 01/07/2004.	94 Spear, Leeds & Kellogg 94 Spear, Leeds & Kellogg	3,300.000	299,893		273,880 229,754	307,474 247,698	(33,594)			(33,594)		273,880 229,754		26,013 15,689	26,013 15,689			-1-1
577778-10-3 Common Stock	D 01/07/2004	34. Spear, Leeds & Kellogg	7,000.000	207,215		215,543	203,490	12,053			12,053		215,543		(8,327)	(8,327)			7
58405U-10-2Inc. Common Stock	.D02/28/2004	04. Various.	916.560	17,457		15,865	15,577	(13,071)			(13,071)		15,865		1,592	1,592			Т
589331-10-7. Stock		34 Spear, Leeds & Kellogg	3,800.000	181,726		237,248	384,026	(146,778)			(146,778)		237,248		(55,522)	(55,522)	1,406		Т
589331-10-7. Stock	D 02/28/2004	34. Spin Off	0.000	10,853		10,853	(208,466)	219,319			219,319		10,853			0			7
693506-10-7 Common Stock	.01/07/2004	34 Spear, Leeds & Kellogg	4,300.000	273,768		202,317	275,286	(72,969)			(72,969)		202,317		71,451	71,451			7
724479-10-0. Stock.	.D01/07/2004.	34 Spear, Leeds & Kellogg	6,600.000	271,379		254,964	268,092	(13, 128)			(13, 128)		254,964		16,416	16,416			Т
806605-10-1 Stock	D01/07/2004.	34. Spear, Leeds & Kellogg	6,700.000	118,886		249,290	116,513	132,777			132,777		249,290		(130,404)	(130,404)			T
868536-10-3. Stock	D 01/07/2004	34. Spear, Leeds & Kellogg.	4,600.000	131,232		909' 26	131,514	(33,906)			(33,906)		909' 26		33,624	33,624			7

STATEMENT AS OF MARCH 31, 2004 OF THE John Deere Health Plan, Inc.

# SCHEDULE D - PART 4 Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of by the Company During the Current Quarter

22	NAIC Desig- nation or Market Indicator	XXX	XXX	XXX	XXX	XXX	XXX	
21	rt.	XXX	XXX	XXX	XXX	XXX	XXX	
20		1,406	1,406	5,076	5,076	5,076	265,753	
		(29,468)	9,468)	29,396	962,6	29,396	452,334	
19	Total (Loss							
18	Realize (Loss Dispo	(29,468)	(29,46	29,39	29,396	29,396	452,334	
17	Foreign Exchange Gain (Loss) on Disposal	0	0	0	0	0	0	
16	d alue	1,787,321	1,787,321	3,235,728	3,235,728	3,235,728	15,985,165	
	15  Total Foreign Exchange in B/A. C.V. D	0	0	0	0	0	0	
Value		32,758	32,758	(12,867)	(12,867)	(12,867)	(414)	
inge in Book/Adjusted Carrying Value	Current Year's Other Than Temporary Total Impairment B/, Recognized (11+)	0	0	0	0	0	0	
in Book/Adjı		0	0	0	0	0	453	
Change	12 Current Year's (Amortization)/ Accretion						12,453	
	11 Unrealized Valuation Increase/ (Decrease)	32,758	32,758	(12,867)	(12,867)	(12,867)	(12,867)	
10	Prior Year Book/Adjusted Carrying Value	1,741,204	1,741,204	3,235,236	3,235,236	3,235,236	15,972,220	٠
6	ost	1,787,321	1,787,321	3,235,728	3,235,728	3,235,728	15,850,352	
8	Par Value	XXX	XXX	XXX	XXX	XXX	XXX	
7	Consideration	1,757,852	1,757,852	3,265,123	3,265,123	3,265,123	16,437,499	
9	Number of Shares of Stock C							of such issues
2	Name of Purchaser							(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues
4	Disposal Date		and Miscellaneous			ocks		market indicat
က	L O - ⊕ - □ ⊏		<ul> <li>Industrial and I</li> </ul>	t 4	s),	ommon St		ng the NAIC
2		al United S	non Stocks	mon Stocks - Part	al - Commor	al - Preferred and Common Stocks	18	non stock bearin
1		Tota	@888889 - Com	7299997 - Com	7299999 - Tota	- Tot	7499999 Totals	) For all comr
<u> </u>					1	<u> </u>	<u>: : : i  </u>	a,

Schedule DB - Part A - Section 1

NONE

Schedule DB - Part B - Section 1

NONE

Schedule DB - Part C - Section 1

NONE

Schedule DB - Part D - Section 1

NONE

Schedule E - Part 1
NONE



NAIC Code:

95378

Company: John Deere Health Plan, Inc.

# **SVO Compliance Certification**

The undersigned is an officer of the insurer responsible for reporting investments to the SVO and/or with performing all filings with appropriate state regulatory officials and the NAIC and is, therefore, required to be familiar with the requirements of such filings. The undersigned officer certifies that to the best of my knowledge, information, and belief, all prices or NAIC Designations for the securities reported in this statement have been obtained directly from the SVO except as specifically identified below. The officer further certifies that to the best of my knowledge, information, and belief, since the last filing of a quarterly or annual statement:

- All securities previously valued by the insurer and identified by a Z suffix have now been submitted to the SVO for a valuation or disposed of by sale or otherwise with the result that all prices and NAIC Designations reported in this statement have been provided by the SVO, except for provisionally exempt and new purchases identified in Schedule D and DA with a Z suffix or items submitted but not yet processed by the SVO.
- 2. Any newly purchased securities now identified with a Z suffix shall be submitted to the SVO within 120 days of purchase.
- 3. All necessary information on securities which have been previously designated NR (not rated due to lack of current information) by the SVO have either been submitted to the SVO by the insurer for a valuation or disposed of by the insurer.
- 4. All material issuer events (as defined below) have been reported to the SVO.

A material issuer event is a generic or transaction specific credit event of which the insurer is currently aware, which by its nature would signify to a reasonably prudent insurer that a material change in the credit quality or price of the investment or security has occurred.

As an illustration, and not by way of limitation, the following shall be deemed to constitute material issuer events:

- a. Recapitalizations or capital restructuring whether within or without Chapter 11 of the US Bankruptcy Code.
- b. Nonpayment, deferral, or payment in kind through waiver of any principal or contractual interest payment.
- c. Any change in the maturity of a security.
- d. Changes in the lender's collateral position, including releases of collateral, or the taking of a collateral position whether by operation of negative pledge covenant or otherwise.
- e. Events of a like character or of a like effect, which would be considered material to an investment professional.
- f. Exceptions

Entry	Z Counts	Z* Counts
Z01		
Z02		
Z03		
Z04		
Z05		
Z06		
Z07		
Z08		
Z09		
Z10		

James Alan Cousins	
Name of Investment Officer	
Ciamatura of Investment Officer	_
Signature of Investment Officer	
Senior Vice President, Chief Financial Officer & Treasurer	
Title of Signatory	
05/05/2004	

Date

Attach certificate to each quarterly statement.